

<b>SCC eFile</b>	<b>2012 ANNUAL REPORT</b> <b>COMMONWEALTH OF VIRGINIA</b> <b>STATE CORPORATION COMMISSION</b>	212512331				
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME:  <b>HENKEL CORPORATION</b></p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:  <b>CORPORATION SERVICE COMPANY</b>  <b>Bank of America Center, 16th Floor</b>  <b>1111 East Main Street</b>   <b>RICHMOND, VA 23219</b></p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE:  <b>RICHMOND CITY</b></p> <p>4.) STATE OR COUNTRY OF INCORPORATION:  <b>VA</b></p> </div> <div style="width: 35%;"> <p>DUE DATE: <b>4/30/2012</b></p> <p>SCC ID NO: <b>F0610701</b></p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>2,000,000</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED	COMMON	2,000,000
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COMMON	2,000,000					
6.) PRINCIPAL OFFICE ADDRESS:  <div style="text-align: center;">           ADDRESS: ONE HENKEL WAY             CITY/ST/ZIP: ROCKY HILL, CT 06067         </div>						
7.) DIRECTORS AND PRINCIPAL OFFICERS:      All directors and principal officers must be listed. An individual may be designated as both a director and an officer.						
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;">           NAME: JEFFREY C PICCOLOMINI            TITLE: PRES/CFO/DIR            ADDRESS: ONE HENKEL WAY            CITY/ST/ZIP/CO: ROCKY HILL, CT 06067         </td> <td style="width: 50%; text-align: right; vertical-align: top;"> <input checked="" type="checkbox"/> OFFICER      <input checked="" type="checkbox"/> DIRECTOR         </td> </tr> </table>			NAME: JEFFREY C PICCOLOMINI TITLE: PRES/CFO/DIR ADDRESS: ONE HENKEL WAY CITY/ST/ZIP/CO: ROCKY HILL, CT 06067	<input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR		
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<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;">           NAME: JULIAN O. COLQUITT            TITLE: PRESIDENT            ADDRESS: ONE HENKEL WAY            CITY/ST/ZIP/CO: ROCKY HILL, CT 06067         </td> <td style="width: 50%; text-align: right; vertical-align: top;"> <input checked="" type="checkbox"/> OFFICER      <input type="checkbox"/> DIRECTOR         </td> </tr> </table>			NAME: JULIAN O. COLQUITT TITLE: PRESIDENT ADDRESS: ONE HENKEL WAY CITY/ST/ZIP/CO: ROCKY HILL, CT 06067	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR		
NAME: JULIAN O. COLQUITT TITLE: PRESIDENT ADDRESS: ONE HENKEL WAY CITY/ST/ZIP/CO: ROCKY HILL, CT 06067	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR					
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;">           NAME: M. MARGARET BANAS            TITLE: VP &amp; ASST. SECY            ADDRESS: 19001 N. SCOTTSDALE ROAD            CITY/ST/ZIP/CO: SCOTTSDALE, AZ 85255         </td> <td style="width: 50%; text-align: right; vertical-align: top;"> <input checked="" type="checkbox"/> OFFICER      <input type="checkbox"/> DIRECTOR         </td> </tr> </table>			NAME: M. MARGARET BANAS TITLE: VP & ASST. SECY ADDRESS: 19001 N. SCOTTSDALE ROAD CITY/ST/ZIP/CO: SCOTTSDALE, AZ 85255	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR		
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NAME:	RAPHAELA LESSMANN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP/TREAS		
ADDRESS:	ONE HENKEL WAY		
CITY/ST/ZIP/CO:	ROCKY HILL, CT 06067		
NAME:	JOHN PREYSNER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP & ASST. SECY		
ADDRESS:	ONE HENKEL WAY		
CITY/ST/ZIP/CO:	ROCKY HILL, CT 06067		
NAME:	PAUL R BERRY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SVP/CLO/SEC		
ADDRESS:	ONE HENKEL WAY		
CITY/ST/ZIP/CO:	ROCKY HILL, CT 06067		
NAME:	SEAN LARMON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST TREASURER		
ADDRESS:	ONE HENKEL WAY		
CITY/ST/ZIP/CO:	ROCKY HILL, CT 06067		
NAME:	MICHAEL BIONDOLILLO	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SVP, HR		
ADDRESS:	ONE HENKEL WAY		
CITY/ST/ZIP/CO:	ROCKY HILL, CT 06067		
NAME:	AMY SPAN-WERGELES	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	ONE HENKEL WAY		
CITY/ST/ZIP/CO:	ROCKY HILL, CT 06067		
NAME:	JAN-DIRK AURIS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CHAIRMAN		
ADDRESS:	HENKELSTRABE 67		
CITY/ST/ZIP/CO:	, , FN		
NAME:	JULIAN O COLQUITT	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	ONE HENKEL WAY		
CITY/ST/ZIP/CO:	ROCKY HILL, CT 06067		
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ GREGORY GAGLIONE	GREGORY GAGLIONE, VP &	4/4/2012	
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	ASST. SEC.	DATE	
	PRINTED NAME AND CORPORATE TITLE		
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			